

Please type a plus sign (+) inside the box → +

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number 09/678,591

Filing Date October 3, 2000

First Named Inventor Quay, Steven

Group Art Unit 1616

Examiner Name

Total Number of Pages in This Submission

1

Attorney Docket Number

20424000510

RECEIVED
APR 01 2002
TECH CENTER 1600/2900

ENCLOSURES (check all that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers
(for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69)
and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation
Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s)
(please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | Return Receipt Postcard |
| <input checked="" type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | Form 1449 |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) | 9 References |
| <input type="checkbox"/> Response to Missing Parts/
Incomplete Application | | |
| <input type="checkbox"/> Response to Missing
Parts under 37 CFR
1.52 or 1.53 | | |

COPY OF PAPERS
ORIGINALLY FILED

Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP	Reg No. 38,515
	Jeffrey J. King	

Signature

Date

03/26/01

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

03/26/01

Typed or printed name Linda M. Povinelli

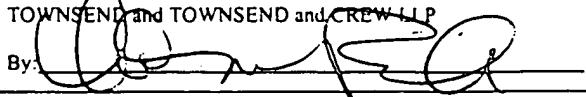
Signature

Date

03/26/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Attn: Group Director, Assistant Commissioner for Patents, Washington, D.C. 20231, on 3/26/01

TOWNSEND and TOWNSEND and CREW LLP
By: 

PATENT

Attorney Docket No.: 20424-000510US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Dr. Steven C. Quay

Application No.: 09/678,591

Filed: October 3, 2000

For: LONG-ACTING OXYTOCIN
ANALOGUES FOR THE TREATMENT
AND PREVENTION OF BREAST
CANCER AND PSYCHIATRIC
DISORDERS

Group Director: 1616

Examiner: Unassigned

Art Unit: 1616

**INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98**

Attn: Group Director
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

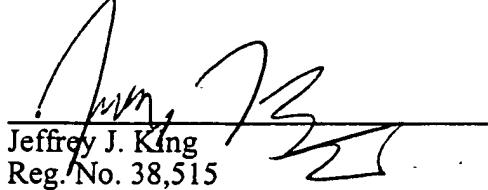
The references cited on attached form PTO-1449 are being called to the attention of the Examiner. In accordance with 37 CFR §1.98(d), copies of the references can be found in Application No. 09/481,058, filed January 11, 2000 (Attorney Docket No. 18072-000500US) unless otherwise noted. It is respectfully requested that the cited information be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Applicants believe that their invention as claimed is patentable over the above references taken alone or in any combination. As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted

or that this statement encompasses all the possible relevant information. No inference should be drawn as to the pertinence of the references based on the order in which they are presented.

Applicant believes that no fee is required for submission of this statement since it is being submitted prior to the first Office Action. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,


Jeffrey J. King
Reg. No. 38,515

Dated: 3/26/01

Customer No. 20350

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, 8th Floor
San Francisco, California 94111-3834
Tel: 206-467-9600
Fax: 415-576-0300
JKJ:lmp

SE 5006998 v2

RECEIVED
APR 01 2002
TECH CENTER 1600/2900

COPY OF PAPERS
ORIGINALLY FILED

TO THE U.S. PATENT & TRADEMARK OFFICE
Please stamp the date of receipt of the following document(s)
and return this card to us:

RE: Dr. Steven C. Quay

TITLE OF DOCUMENT(S):

Transmittal Form
Information Disclosure Statement
Form 1449
9 References

Application No. 09/678,591

File No. 20424-000510US

Date Due NA

APR 06 2001

Date Mailed 03/26/01

Atty/Secty. JJK/lmp

